

Fill in this information to identify the case:		
United States Bankruptcy Court for the:		
Eastern	District of	New York
(State)		
Case number (if known): _____ Chapter 7		

CLERK
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

2019 JUN -5 P 12:57 Check if this is an
amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name

Gates 289 AS Inc

2. All other names debtor used in the last 8 years

Include any assumed names, trade names, and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN)

8 4 - 1 9 8 3 6 3 1

4. Debtor's address

Principal place of business

289 GATES AVENUE

Number Street

BROOKLYN

NY

11216

City

State

ZIP Code

Mailing address, if different from principal place of business

Number Street

P.O. Box

City State ZIP Code

Location of principal assets, if different from principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL)

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
 Partnership (excluding LLP)
 Other. Specify: _____

Debtor	Gates 289 AS Inc		Case number (if known) _____
	Name		
<p>7. Describe debtor's business</p> <p>A. <i>Check one:</i></p> <p><input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A)) <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) <input type="checkbox"/> Railroad (as defined in 11 U.S.C. § 101(44)) <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A)) <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6)) <input type="checkbox"/> Clearing Bank (as defined in 11 U.S.C. § 781(3)) <input checked="" type="checkbox"/> None of the above</p> <p>B. <i>Check all that apply:</i></p> <p><input type="checkbox"/> Tax-exempt entity (as described in 26 U.S.C. § 501) <input type="checkbox"/> Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3) <input type="checkbox"/> Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))</p> <p>C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.uscourts.gov/four-digit-national-association-naics-codes.</p> <p style="text-align: center;"><u>5511</u></p>			
8. Under which chapter of the Bankruptcy Code is the debtor filing?	<p><i>Check one:</i></p> <p><input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11. <i>Check all that apply:</i></p> <p><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that). <input type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). <input type="checkbox"/> The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the <i>Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11</i> (Official Form 201A) with this form. <input type="checkbox"/> The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2. <input type="checkbox"/> Chapter 12</p>		
9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. District _____ When _____ Case number _____ MM / DD / YYYY</p> <p>District _____ When _____ Case number _____ MM / DD / YYYY</p>		
<p>If more than 2 cases, attach a separate list.</p> <p>10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?</p> <p>List all cases. If more than 1, attach a separate list.</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes. Debtor _____ Relationship _____ District _____ When _____ MM / DD / YYYY</p> <p>Case number, if known _____</p>			

Debtor	Gates 289 AS Inc		Case number (if known) _____												
	Name _____														
<p>11. Why is the case filed in this district? <i>Check all that apply:</i></p> <p><input checked="" type="checkbox"/> Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.</p> <p><input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.</p>															
<p>12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.</p> <p>Why does the property need immediate attention? (Check all that apply.)</p> <p><input type="checkbox"/> It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety. What is the hazard? _____</p> <p><input type="checkbox"/> It needs to be physically secured or protected from the weather.</p> <p><input type="checkbox"/> It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).</p> <p><input type="checkbox"/> Other _____</p>															
<p>Where is the property? _____</p> <p>Number _____ Street _____</p> <p>_____</p> <p>City _____ State _____ ZIP Code _____</p>															
<p>Is the property insured?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Insurance agency _____</p> <p>Contact name _____</p> <p>Phone _____</p>															
Statistical and administrative information															
<p>13. Debtor's estimation of available funds <i>Check one:</i></p> <p><input type="checkbox"/> Funds will be available for distribution to unsecured creditors.</p> <p><input checked="" type="checkbox"/> After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.</p>															
<p>14. Estimated number of creditors</p> <table border="0"> <tr> <td style="width: 33.33%;"><input checked="" type="checkbox"/> 1-49</td> <td style="width: 33.33%;"><input type="checkbox"/> 1,001-5,000</td> <td style="width: 33.33%;"><input type="checkbox"/> 25,001-50,000</td> </tr> <tr> <td><input type="checkbox"/> 50-99</td> <td><input type="checkbox"/> 5,001-10,000</td> <td><input type="checkbox"/> 50,001-100,000</td> </tr> <tr> <td><input type="checkbox"/> 100-199</td> <td><input type="checkbox"/> 10,001-25,000</td> <td><input type="checkbox"/> More than 100,000</td> </tr> <tr> <td><input type="checkbox"/> 200-999</td> <td></td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,001-5,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000	<input type="checkbox"/> 200-999		
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<input type="checkbox"/> 200-999															
<p>15. Estimated assets</p> <table border="0"> <tr> <td style="width: 33.33%;"><input checked="" type="checkbox"/> \$0-\$50,000</td> <td style="width: 33.33%;"><input type="checkbox"/> \$1,000,001-\$10 million</td> <td style="width: 33.33%;"><input type="checkbox"/> \$500,000,001-\$1 billion</td> </tr> <tr> <td><input type="checkbox"/> \$50,001-\$100,000</td> <td><input type="checkbox"/> \$10,000,001-\$50 million</td> <td><input type="checkbox"/> \$1,000,000,001-\$10 billion</td> </tr> <tr> <td><input checked="" type="checkbox"/> \$100,001-\$500,000</td> <td><input type="checkbox"/> \$50,000,001-\$100 million</td> <td><input type="checkbox"/> \$10,000,000,001-\$50 billion</td> </tr> <tr> <td><input type="checkbox"/> \$500,001-\$1 million</td> <td><input type="checkbox"/> \$100,000,001-\$500 million</td> <td><input type="checkbox"/> More than \$50 billion</td> </tr> </table>				<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion	<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion	<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion
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Debtor	Gates 289 AS Inc		Case number (if known) _____
	Name _____		
16. Estimated liabilities		<input type="checkbox"/> \$0-\$50,000 <input type="checkbox"/> \$1,000,001-\$10 million <input type="checkbox"/> \$500,000,001-\$1 billion <input type="checkbox"/> \$50,001-\$100,000 <input type="checkbox"/> \$10,000,001-\$50 million <input type="checkbox"/> \$1,000,000,001-\$10 billion <input checked="" type="checkbox"/> \$100,001-\$500,000 <input type="checkbox"/> \$50,000,001-\$100 million <input type="checkbox"/> \$10,000,000,001-\$50 billion <input type="checkbox"/> \$500,001-\$1 million <input type="checkbox"/> \$100,000,001-\$500 million <input type="checkbox"/> More than \$50 billion	

Request for Relief, Declaration, and Signatures

WARNING — Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

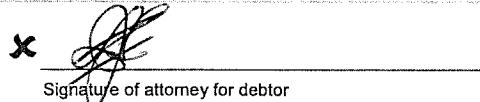
Executed on 06.05.2019
MM / DD / YYYY


Signature of authorized representative of debtor

Printed name _____

Title _____

18. Signature of attorney


Signature of attorney for debtor

Date _____

MM / DD / YYYY

Printed name _____

Firm name _____

Number Street _____

City _____

State _____

ZIP Code _____

Contact phone _____

Email address _____

Bar number _____

State _____

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

In re:

Case No.
Chapter

Debtor(s)

AFFIRMATION OF FILER(S)

All individuals filing a bankruptcy petition on behalf of a pro se debtor(s), must provide the following information:

Name of Filer: Annette Sanderson
Address: 318 E 16th ST Brooklyn NY 11224
Email Address: ajlessie@yahoo.com
Phone Number: (718) 930-5326

Name of Debtor(s): _____

CHECK THE APPROPRIATE RESPONSES:

ASSISTANCE PROVIDED TO DEBTOR(S):

I PREPARED THE PETITION AND/OR ASSISTED WITH THE PAPERWORK BY DOING THE FOLLOWING: Completed the forms

I DID NOT PROVIDE THE PAPERWORK OR ASSIST WITH COMPLETING THE FORMS.

FEE RECEIVED:

X I WAS NOT PAID.

I WAS PAID.

Amount Paid: \$ _____.

I/We hereby affirm the information above under the penalty of perjury.

Dated: 06.05.2019

Hanson
Filer's Signature

MATRIX

**HSBC Bank USA, N.A.
P.O. Box 2013.
Buffalo, NY 14240**